

## ABSTRACT

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**Background:** Individuals with family histories are recommended to begin cancer surveillance strategies at ages younger than average risk individuals. Few studies have examined how often increased risk individuals undergo screening.

**Objective:** To determine cancer screening rates in increased risk individuals and evaluate the comprehensiveness of the family history assessment

**Design:** Retrospective chart review and patient survey.

**Participants:** Nine-hundred and ninety five consecutively seen new patients at two primary care practices in Boston, MA

**Measurements:** Cancer risk estimates were constructed based on pedigree information and cancer screening recommendations were collected through chart review.

**Results:** In patients younger than 50 years, 50% (95% CI 20, 80) of individuals at increased risk for colorectal cancer had been recommended for a colorectal cancer screening procedure compared to 89% (95% CI 73, 100) of increased risk individuals 50 years or older. For women under the age of 40 years, 45.5% (95% CI 10.4, 80.5) of individuals at increased risk for breast cancer had been recommended for mammography screening compared to 78% (95% CI 44, 100) of increased risk women 40 years or older. Participants completing the family history survey identified 252 first- and second-degree relatives affected with either breast, ovarian, or colorectal cancer compared to 124 through chart review.

**Conclusions:** About half of individuals who are potential candidates for early initiation cancer screening are recommended for screening. Individuals at increased risk for colorectal, breast or ovarian cancer frequently do not have documentation of this increased risk within their medical record.